DEC 3 1 2009

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation. OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077		
1. TITLE OF NEWSPAPER Meade County Times		^{2. DATE} 10/1/2009
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLIST 52	BED ANNUALLY 3B. ANNUAL SUBSCRIPTION PRICE \$ 36.00	
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)		
(Not printers) 1022 Main Street, Sturgis, Meade County, South Dakota 57785		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE		
PUBLISHER (Not printers) 1022 Main Street, Sturgis, Meade County, South Dakota 57785		
6. FULL NAME OF PUBLISHER: Hollie Stalder		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. FULL NAME COMPLETE MAILING ADDRESS		
Lee Enterprises 201 N	N. Harrison Street STE 600, Davenport, IA 52801	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING I PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.		
Attached	T THE PARTY OF THE	
O EXTEND AND MATURE OF CURCUIT ATIOM	AVERAGE NO. COPIES EACH	ACTUAL NO. COPIES
9. EXTENT AND NATURE OF CIRCULATION	ISSUED PRECEDING 12 MONTHS	ISSUED NEAREST TO FILING DATE
A.TOTAL NO. COPIES (Net Press Run)	1751	1653
B.PAID AND/OR REQUESTED CIRCULATION		
 Sales through dealers and carriers, street vendors and counter sales. 	917	826
2. Mail Subscription	493	480
(Paid and or requested) C.TOTAL PAID AND/OR REQUESTED CIRCULATION		
(Sum of 9B1 and 9B2)	1410	1306
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	11	11
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	12	35
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1433	1352
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	318	301
2. Return from News Agents	0	0
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	1751	1653
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public I sweat that the statements made by me are true, correct, and complete: Signature) (Title)		
'Hi		
State of South Dakota)		
County of LAWRENCE)	Descenter	
	Notary Public	
(Seal)	My commission expires: $11-9-2012$	

Form: SOS REC 051 7/2004